



THE UNITED STATES PATENT AND TRADEMARK OFFICE

#3/a
7/10/03
TVC

Application No.: H. Fred Campbell
Applicant(s): 10/082,999
Filed: February 26, 2002
Title: BUILDING IN SUSPENSION
Art Unit: 3635
Examiner: Kevin McDermott
Atty. Docket No.: 2696-P3003.001
In reply to: Office Action Dated April 9, 2003

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Irene M. Ries
IRENE M. RIES

Mail Stop Non-Fee Amendment
Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

AMENDMENT

In response to the Office Action dated April 9, 2003, amendment is hereby made
as follows:



3635

PTO/SB/21 (03-03)

Approved for use through 04/30/2003. OMB 0651-0031
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/082,999	
	Filing Date	February 26, 2002	
	First Named Inventor	Campbell, H. Fred	
	Art Unit	3635	
	Examiner Name	Kevin McDermott	
Total Number of Pages in This Submission	8	Attorney Docket Number	2696-P3003.001

Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)

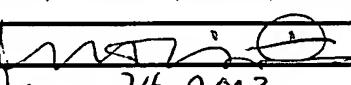
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): return postcard
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	WILLIAM H. GRIFFITH, REG. NO. 16,706 REISING, ETHINGTON, BARNES, KISSELLE, P.C.
Signature	
Date	June 24, 2003

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Typed or printed	Irene M. Ries	Date	June 24, 2003
Signature			

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